## PART B - FEE(S) TRANSMITTAL

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THE PROCTER & GAMBLE COMPANY Global Legal Department - IP Sycamore Building - 4th Floor 299 East Sixth Street CINCINNATI, OH 45202				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stot ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
				Connie Dammeyer			(Depositor's name)
				/Connie Dammeyer/			(Signature)
			[	December	10,	2010	(Date)
APPLICATION NO.	NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/824,118 04/14/2004		•	Haimanot Bekele		9209M		6444
TITLE OF INVENTION:	ANHYDROUS, TRAN	ISFER-RESISTANT CO	SMETIC LIP COMPO	SITIONS			
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSU	TE FEE	TOTAL FEE(8) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$0		12/30/2010
EXAMINER		ART UNIT	CLASS-SUBCLASS	is			
SRIVASTAV.	A, DEVESH	1615	424-401000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).  Change of correspondence address (or Change of Correspondence Address form PIOSB/122) alunched.  The Address form PIOSB/122) alunched.  The Address' indication for "Fee Address" indication form PITOSB/142 alunched.  The Address' indication for "Fee Address" indication form PITOSB/147 alunched. Use of a Custome Number is required.  Namber is required.			registered attorney or agent) and the names of up to 2 registered patent attorneys or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3 Carl Roof listed, no name will be printed.				
PLEASE NOTE: Unle recordation as set forth (A) NAME OF ASSIC	ess an assignee is ident in 37 CFR 3.11. Comp	claim vill appear on the patent. If an assignee is identified below, the document has been filed for Of a substitute for filing at assignment.  (B) RESIDENCY: CITY and STATE OR COUNTRY)  Cincinnati, OH					
Please check the appropri	ate assignee category or	categories (will not be po	rinted on the patent):	☐ Individual ☐ C	orporati	on or other private grou	ap entity Government
4a. The following fee(s) are submitted:  ☐ Issue Fee ☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies			Ab. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)   A check is enclosed.   Payment by reofit card. Form PTO-2038 is attached.   The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 162—2830. (enclose an extra copy of this form).				
	SMALL ENTITY state	is. See 37 CFR 1.27.				TTY status. See 37 CF	
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Authorized Signature /John Powell/		Date December 10, 2010					
Typed or printed nameJohn G. Powell			Registration No. 57,927				
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